IT'S TIME... TO TALK ABOUT IT! YOUR VOICE, OUR FUTURE PREVENT SEXUAL VIOLENCE

The earlier you start the easier it is...but it's never too late

Parents and caregivers are essential in early healthy sexuality development. When parents listen to their children and answer questions about sex and sexuality honestly from the start, they open the door for future communication and show that they can be trusted.

When hearing "healthy sexuality" as children are entering adolescence, parent's minds often go straight to the red flag of teens and sex. Long before children reach their teens, they have received many messages about sexuality from family and community. They have also been heavily influenced by their peers, the media and internet.

That's why you want to be part of the conversation! Talk about what matters to you. By sharing your values, your children will think about those values when the time comes for them to make choices in life.

All kids will learn about sex somehow, but it makes a big difference when they hear about it from you.



Healthy sexuality is vast, encompassing our values, attitudes, interactions and behaviors. Educating teens on healthy sexuality is not solely reproductive education, it also includes:

- Preventing sexual violence by addressing gender stereotypes and inequality
- Promoting healthy and equitable dating relationships
- Encouraging sexual boundaries and understanding of laws concerning consent and inability to consent
- Recognizing sexual harassment, abuse and violence, and know where to get help

April is Sexual Assault
Awareness Month

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- Adolescent Sexual Development
- Tips to Help Parents and Caregivers Understand Sexual Violence
- Sexuality & Sexual Violence Among Individuals with Disabilities
- The ACE Study
- Helping influence their peers by serving as positive examples and active bystanders if they witness abuse
- Providing age appropriate information on sexual orientation and gender identity
- Providing age appropriate information on preventing pregnancy and sexually transmitted infections
- Empowering young people to ask questions and seek support when needed

Get more information at www.nsvrc.org/saam

Understanding Adolescent Sexual Development

As an adult, it can be easy to forget what it was like to be an adolescent. The following information aims to provide an understanding of adolescent sexual development to help adults better support youth on their path to becoming healthy adults.

Early adolescence (Ages 10-14)

Puberty and physical changes occur

Time of emotional and relationship development

Common behaviors/concerns

- Body image concerns
- Self-critical/Concerned with being "normal"
- Increased need for privacy & independence
- Masturbation is common
- Socializing with peers is important

Middle adolescence (Ages 15-17)

Continued physical changes

Exploring independence and dating relationships

Establishing themselves as an individual outside of the context of their family

Common behaviors/concerns

- Increased interest in being seen as physically and sexually attractive
- Interest in dating and relationships
- Trying out different clothes, friends, and interests in an attempt to find their identity
- Wanting parents to be less involved

Late adolescence (Ages 18-21)

Physical growth and body changes are ending

Formation of a clear sexual identity

Identity continues to develop

Common behaviors/concerns

- Greater acceptance of physical self & improved body image
- Romantic relationships are typically of high importance
- Establishing a sense of who they are in a relationship, and what they want
- Sexual activity is common
- Thinks more about the future
- Decisions and values are based on their own beliefs and less on those of peers

Resource for parents

http://answer.rutgers.edu/page/parentresources http://www.plannedparenthood.org/parents/

Resource for Parents, Families and Friends of Lesbians and Gays www.pflag.org

Tips for Parents

- Provide age-appropriate sexuality information on topics such as puberty, reproduction, healthy relationships, sexual orientation & gender identity, boundaries and body image.
- Help to build critical thinking skills to separate fact from fiction in media, such as TV, music, video games, pornography, and other depictions of sexuality.
- Keep an open and honest dialogue. Ask questions, and most importantly, listen.
- Address ways to deal with peer pressure.
 Encourage independence while setting clear boundaries
- Continue messages about rights and responsibilities in relationships. Intervene and provide guidance when characteristics of unhealthy relationships and/or sexual violence occur.
- Encourage adolescents to be a positive influence on their peers and their community

Information adapted from from www.nsvrc.org/saam Alison Bellavance, M.Ed.

Tips to Help Parents and Caregivers Understand Sexual Violence

Sexual Violence occurs when someone is forced or manipulated into unwanted or illegal sexual activity. Some examples include unwanted touching, rape, incest, child sexual abuse, intimate partner violence, sexual

harassment, threats, exposure and voyeurism. Unfortunately, sexual violence is very common and is most often perpetrated by someone the victim knows.

Parents and caregivers are the first line of defense a child has against sexual violence. They should teach their children skills that will reduce their risk of becoming victims or perpetrators of sexual violence, and the parents should learn to recognize signs of the occurrence of sexual violence. All adults are responsible for keeping children safe and protecting them from harm.

Below are some tips to help you:

- Be a role model for respectful behavior.
- Talk with your children about healthy sexual development and personal boundaries. Create an open dialogue that encourages your child to ask questions about these subjects.
- Intervene and speak up when you see inappropriate behavior. Don't ignore feelings of suspicion that you may have about sexual abuse occurring. Teach your children to do the same.
- Watch for warning signs of those experiencing sexual abuse; sudden changes in behavior or mood, lower grades and social withdrawal.
- If someone discloses sexual abuse to you, be mindful of your own response.

 Create a safe space for them to talk and share. Allow them to share in their own time and the amount that they are comfortable sharing. Establish a sense of trust and believe their story. Many survivors struggle sharing their stories for fear that others will not believe them.
- Learn more about sexual violence and how to report it. Use the resources below and share the information with others.

Incidence in which a victim of sexual assault knows the perpetrator varies by age of the victim

- 90% for children
- 64% for teen and adult females
- 40% for teen and adult males

Helpful Resources:

www.nsvrcc.org

Childhelp National Child Abuse Hotline: 1-800-4-A —CHILD www.childhelp.org

www.parentsformeganslaw.org

<u>www.stopitnow.org</u> www.loveisrespect.org

*Adapted from "Understanding sexual violence: Tips for parents and caregivers" by National Sexual Violence Resource Center, 2014



Sexuality and Sexual Violence among Individuals with Disabilities

By Natalie Marie Martin, Therapist YWCA West Central Michigan

Children dream of what their lives are going to be like when they grow-up. They play games like house. They make things like "cootie catchers", which are supposed to predict who they will fall in love with. It is not uncommon to overhear a teenager gossiping about their latest crush. These experiences help shape our ideas about relationships and sexuality. The dream of love and romance is one that is experienced by many people—including individuals with disabilities. It is a normal part of human development.

Over the last decade, there have been great strides to increase awareness of sexual violence experienced by individuals with disabilities. Existing research suggests that individuals with disabilities are at least two times more likely than the average population to experience sexual violence within their lifetime. Research further suggests that individuals who have an intellectual disability may be anywhere from four to ten times more likely to experience sexual violence within their lifetime.

There are several factors which may play a role in increasing the risk of sexual victimization among individuals who have a disability. One of these factors being misconceptions around sexuality and people who have a disability. Most people with or without a disability long for affection, companionship, and personal intimacy. Both individuals with and

without disabilities have sexual desires which are a normal part of development.

Too often, individuals with disabilities, especially people with intellectual disabilities, are assumed to be "child-like", non-sexual or unable to control their sexual urges. As a result many parents, caregivers and professionals in the lives of people with disabilities discourage openly talking about sex. If sex is discussed, many individuals with disabilities are taught that their sexuality is something bad and shameful.

In order to work toward ending sexual violence, those connected with individuals with disabilities must work on providing people with disabilities-accurate information about human sexuality. Teaching anatomical language for reproductive parts, using realistic visual aids and teaching with real life scenarios could give someone with a disability information they can use when faced with a sexual situation. Moreover, teaching sexual information in a manner which meets each person's individual needs can be extremely important, considering that not everyone learns and communicates in the same manner. This sexual information not only acts as a future reference point, but could give someone with a disability tools they can use to communicate about red flags of potential sexual perpetration and report if a sexual assault has occurred.

"Unfortunately, avoidance, sexual shaming and the lack of accurate sexual education are some of the very things which may perpetuate the risk of being sexually victimized."

Natalie Martin, Therapist

On a larger scale, our community needs to work together with people with disabilities, parents and caregivers, disability service providers, sexual assault service providers and other systems that interact with people with disabilities to discuss ways to reduce risk of victimization experienced by people with disabilities. Some of this work has already begun.

In 2012, the Office of Violence Against Women (OVW) awarded the YWCA a grant to work with disability service providers in Kent County (Thresholds, Spectrum Community Services, MOKA, and Hope Network). This collaboration is known as WEAVE (Working to End Assault and Violence for Everyone) and is headed by Project Manager Christine Drewel, Ph.D. This program is doing a tremendous job, and our community is one step closer to ending violence for everyone.

Contact Christine Drewel at cdrewel@ywcawcmi.org for information on WEAVE

The Adverse Childhood Experience (ACE) Study

Centers for Disease Control & Prevention





Sexual violence is more common then many people know. Most people know of someone that has been impacted by sexual violence, or have been directly impacted themselves. Study after study has shown that sexual violence most often begins at an early age, occurs between people that know each other, affects the victim's health for a lifetime, and has huge individual and societal costs.

One such study is the Adverse Childhood Experience or ACE Study. The ACE Study is one of the largest investigations ever conducted to assess associations between experiencing childhood violence or other trauma, and later-life health and well-being. The study is a collaboration between the Centers for Disease Control and Prevention, and Kaiser Permanente's Health Appraisal Clinic in San Diego. The findings of the ACE Study reveal the importance of public health and other community organizations efforts to build strong families and create supportive programs that can assist families at risk of family trauma and violence.

Opportunities to learn more about the ACE Study can be found by visiting the Center for Disease Control & Prevention website at http://www.cdc.gov/ace/ and by attending an upcoming educational opportunity hosted by the Kent County Domestic Violence Community Coordinated Response Team - See sidebar. Another educational opportunity is listed below.

Child Abuse Prevention Panel Hosted by Family Futures

Thursday, April 10 from 2:00-4:00 PM
Grand Valley State University Allendale Campus
Kirkoff Center - Room 2215 / 2216
Please RSVP at www.gvsu.edu/child

Finding from the ACE Study

25% of females and 16% of males from the ACE study reported experiencing sexual abuse as children. Experiencing child sexual abuse has been associated with significant negative short-term and long-term health problems for victims, when compared to those without such exposures

Breaking the Cycle

Using the ACE Research to Address Generational Trauma

Presented by Mark Peterson, LMSW Bethany Christian Services

Learning objectives:

- Define trauma, including acute, chronic, and complex types of trauma
- Explore findings of the ACE Study
- Identify 8 core components of trauma-focused Cognitive Behavior Therapy

Thursday, April 24

Noon-1:30 PM

Kent County Courthouse

5th floor conference room

180 Ottawa Ave NW

Grand Rapids, MI 49503

This event is free and open to the public. No registration necessary.